

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10531301

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/531201

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						
102						
103						
104						
105						
106						
107						
108						
109						
110						
111						
112						
113						
114						
115						
116						
117						
118						
119						
120						
121						
122						
123						
124						
125						
126						
127						
128						
129						
130						
131						
132						
133						
134						
135						
136						
137						
138						
139						
140						
141						
142						
143						
144						
145						
146						
147						
148						
149						
150						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151						
152						
153						
154						
155						
156						
157						
158						
159						
160						
161						
162						
163						
164						
165						
166						
167						
168						
169						
170						
171						
172						
173						
174						
175						
176						
177						
178						
179						
180						
181						
182						
183						
184						
185						
186						
187						
188						
189						
190						
191						
192						
193						
194						
195						
196						
197						
198						
199						
200						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10531301

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
2	/	/				
3	/	/				
4	/	/				
5	/	/				
6	/	/				
7	/	/				
8	/	/				
9	/	/				
10	/	/				
11	/	/				
12	/	/				
13	/	/				
14	/	/				
15	/	/				
16	/	/				
17	/	/				
18	/	/				
19	/	/				
20	/	/				
21	/	/				
22	/	/				
23	/	/				
24	/	/				
25	/	/				
26	/	/				
27	/	/				
28	/	/				
29	/	/				
30	/	/				
31	/	/				
32	/	/				
33	/	/				
34	/	/				
35	/	/				
36	/	/				
37	/	/				
38	/	/				
39	/	/				
40	/	/				
41	/	/				
42	/	/				
43	/	/				
44	/	/				
45	/	/				
46	/	/				
47	/	/				
48	/	/				
49	/	/				
50	/	/				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/	/				
52	/	/				
53	/	/				
54	/	/				
55	/	/				
56	/	/				
57	/	/				
58	/	/				
59	/	/				
60	/	/				
61	/	/				
62	/	/				
63	/	/				
64	/	/				
65	/	/				
66	/	/				
67	/	/				
68	/	/				
69	/	/				
70	/	/				
71	/	/				
72	/	/				
73	/	/				
74	/	/				
75	/	/				
76	/	/				
77	/	/				
78	/	/				
79	/	/				
80	/	/				
81	/	/				
82	/	/				
83	/	/				
84	/	/				
85	/	/				
86	/	/				
87	/	/				
88	/	/				
89	/	/				
90	/	/				
91	/	/				
92	/	/				
93	/	/				
94	/	/				
95	/	/				
96	/	/				
97	/	/				
98	/	/				
99	/	/				
100	/	/				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10/53/301
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
301						
302						
303	1					
304						
305						
306						
307						
308						
309						
310						
311						
312						
313	1					
314						
315	1					
316						
317						
318						
319						
320						
321						
322						
323						
324						
325						
326						
327						
328						
329						
330						
331						
332						
333						
334						
335						
336						
337						
338						
339						
340						
341						
342						
343						
344						
345						
346						
347						
348						
349						
350						
TOTAL IND.	5	↓		↓		↓
TOTAL DEP.	57	←		←		←
TOTAL CLAIMS	62					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
351						
352						
353						
354						
355						
356						
357						
358						
359						
360						
361						
362						
363						
364						
365						
366						
367						
368						
369						
370						
371						
372						
373						
374						
375						
376						
377						
378						
379						
380						
381						
382						
383						
384						
385						
386						
387						
388						
389						
390						
391						
392						
393						
394						
395						
396						
397						
398						
399						
400						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						